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**APPLICANTS**  
 Soon-Suck Jang, KwangJu, KOREA, REPUBLIC OF;

**\*\* CONTINUING DATA \*\*\*\*\***  
 This application is a 371 of PCT/KR05/01846 06/16/2005

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***  
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**\*\* IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*** \* SMALL ENTITY \*  
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Foreign Priority claimed 35 USC 119(a-d) conditions met	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Met after Allowance	<b>STATE OR COUNTRY</b> KOREA, REPUBLIC OF	<b>SHEETS DRAWINGS</b> 4	<b>TOTAL CLAIMS</b> 3	<b>INDEPENDENT CLAIMS</b> 1
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**ADDRESS**  
 LADAS & PARRY LLP  
 224 SOUTH MICHIGAN AVENUE  
 SUITE 1600  
 CHICAGO, IL 60604  
 UNITED STATES

**TITLE**  
 Digital hearing aid enhancing directional performance

<b>FILING FEE RECEIVED</b> 630	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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